BTXN 127 (rev. 1/14)

APR 27 2022

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS

CLERK, U.S. BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS

In Re: Mukki LLC

88888

Case No.: 11-32602-hdh7

Debtor(s)

#### APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

Comes now the undersigned, to make application for an order directing payment of unclaimed funds now on deposit in the Treasury of the United States. Claimant is a \_\_\_\_\_\_ debtor (check one) in the above captioned bankruptcy case and on whose behalf these funds were deposited.

1.	Name of Claimant(s)	E. I. du Pont de Nemours and Company
2.	Name and Title of Authorizing Officer or Representative (If Claimant is an individual, skip to Question No. 3)	Joe Wilson, APAY Improvements Projects Leader
3.	Current Mailing Address	974 Centre Road Wilmington, DE 19805
4.	Telephone Number	302.485.3615
5.	SS# (last 4 digits only) or EIN #	51-0014090
6.	Amount Being Claimed	\$62,575.45

<sub>I,</sub> Joe Wilson	,do hereby state under penalty of perjury that I am legally
entitled to claim these funds for whom the un	claimed funds were deposited into the treasury in the above
referenced bankruptcy case. I certify to the bes	st of my knowledge that all information submitted in support
of this claim is true and correct.	

Chainent Signature

Co-Claimant Signature

Subscribed and Sworn to Before Me this 20th

Notary Public

In and for the State of

My commission expires

### **CERTIFICATE OF SERVICE**

In accordance with 28 U.S.C. § 2042, the undersigned hereby certifies that on the date designated below, a true and correct copy of the foregoing application with all required attachments was mailed to:

Office of the United States Attorney Attn: Unclaimed Funds 1100 Commerce Street, 3<sup>rd</sup> Floor Dallas, TX 75242

Date:

Claimant's Signature

# Instructions for filing the Application for Payment of Unclaimed Funds

The court will only disburse unclaimed funds to the rightful owner upon full proof of the right thereto. Therefore, the following forms and documentation are required:

- 1. An Application for Payment of Unclaimed Funds, include the case name and number.
  - a. If the funds were deposited for joint claimants, both claimants must sign the application.
  - b. The applicant must have legal standing to make the claim. When the owner of record is not the claimant, the signer or claimant requesting release of funds must show proper authority.
- 2. Notice of Service to the US Attorney. (US Attorney's mailing address is on the form)
- 3. Required supporting documentation:
  - 1. A legible copy of a document with former address on it establishing proof of the address of record at the time of the bankruptcy case (a copy of proof of claim, correspondence from the court, tax forms, telephone or water bill, etc.).
  - 2. A photocopy of an official government identification card (i.e. Passport, Military ID, or valid and current driver's license) for each claimant.
  - 3. Form AO213 Vendor Information/TIN Certification.

The following additional documentation is required:

# If the claimant(s) is represented by an attorney or a funds locator:

- 1. Proof of identity of the owner of record.
- 2. An original notarized Power of Attorney signed by the claimant on whose behalf the representative is acting.
- 3. Proof of identity of the representative; and
- 4. Documentation sufficient to establish the claimant's entitlement to the funds. (See above)

### If claiming on behalf of a deceased party:

- 1. Copy of the death certificate.
- 2. Certified copies of probate documents establishing the representative's right to act on behalf of o the decedent's estate
- 3. Proof of personal identity of the estate administrator.

## If the Claimant is a Corporation/Partnership:

- 1. Application must be signed by an agent for and on behalf of the Corporation/Partnership.
- 2. A statement of the signing agent's authority.
- 3. Documentation establishing chain of ownership of the original corporate claimant.
- 4. A photocopy of representative's identification credentials

### Purchased or assigned claims:

1. Documentation evidencing the transfer of claim or proof of the purchase/sale of assets.

Mail the original application to the following address:

U.S. Bankruptcy Court 1100 Commerce St., Room 1254 Dallas, TX 75242

Applications received which do not comply with the above requirements may be denied by the court.

Claims could take up to 90 days to complete.

**Privacy note:** Because documents filed with the court are available through the Internet, the court is committed to the protection of personal identification information. The individual applicant's driver's license number should be blacked out for privacy considerations. Also, all but the last four digits of the Social Security number should be blacked out for the same privacy reasons. **Responsibility.** The responsibility for redacting these personal identifiers rests solely with counsel and the parties. The bankruptcy clerk is not responsible for ensuring compliance.



Corteva Agriscience Chestnut Run Plaza, 974 Centre Road, P.O. Box 2915, Wilmington, DE 19805

#### **EXHIBIT F - AUTHORIZATION LETTER**

I, Robert Tuinstra, Jr., Assistant Treasurer of E. I. du Pont de Nemours and Company, Inc. d/b/a Corteva Agriscience ("EID") being first duly sworn, state as follows:

That Joseph Wilson, APAY Improvements Projects Leader is hereby authorized by and on behalf of E. I. du Pont de Nemours and Company d/b/a Corteva Agriscience (hereinafter referred to as "EID") to claim and receive all unclaimed property funds of any kind, inclusive of Federal, State, or local jurisdiction related payments, currently being held in EID's name.

IN WITNESS, WHEREOF, I have hereto set my hand this Hand ay of September, 2021.

Robert Tuinstra, Jr., Assistant Treasurer

Julian a Bally Notary Public

City/County of New Castle
State of Delaware

The foregoing instrument was acknowledged before me this 14+1 day of Sptchler, 2021.

My commission expires: Tune 12,2022

EXPIRES
JUNE 12, 2022

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# Affiliations Schedule

For tax year ending

12/31/2020

(Rev. October 2016) Department of the Treasury Internal Revenue Service

File with each consolidated income tax return.

Information about Form 851 and its instructions is at www.irs.gov/form851.

OMB No. 1545-0123

Name of common parent corporation

Corteva, Inc Number, street, and room or suite no. If a P.O. box, see instructions. 82-4979096

**Employer identification number** 

PO Box 2920

City or town, state, and ZIP code

Wilmington, DE

19805

Part	Overpayment Credits, Estimated Tax Payments,	and Tax Deposits	(see instructions)	
Corp. No.	Name and address of corporation	Employer identification number	Portion of overpayment credits and estimated tax payments	Portion of tax deposited with Form 7004
	Common parent corporation			
	Subsidiary corporations:			
38	Corteva China, LLC			
	PO Box 2920			
	Wilmington, DE 19805	82-4317771		
39	Pioneer Hi-Bred R.S.A. (Pty) Ltd.			
	PO Box 2920			
	Wilmington, DE 19805	42-1455390		
40	E. I. du Pont de Nemours and Company			
	PO Box 2920			
	Wilmington, DE 19805	51-0014090		
41	DDP AgroSciences US DCOMCO, Inc.			
	PO Box 2920			
	Wilmington, DE 19805	82-1053449		
42	Corteva International Holding Corporation			
	PO Box 2920			
	Wilmington, DE 19805	85-3579371		
43	DuPont Operations Worldwide, Inc			
	PO Box 2920			
	Wilmington, DE 19805	52-2010314		

Part II Principal Business Activity, Voting Stock Information, Etc. (see instructions)									
Corp.		PBA Code	Did the subsidiary make any nondividend distributions?		Stock holdings at beginning of year				
No.		No.			Number of	Percentage of voting		Percentage	Owned by corporation
			Yes	No	shares	power		of value	no.
	Common parent corporation								
-	Subsidiary corporations:								
38	Inactive	Inactive	4	х	100	100.00	%	100.00%	40
39	Oilseed & Grain Farm	111100		Х	17,400	100.00	%	100.00%	6
40	Other Chemical Pro & Mfg	325900		X	2,373,200	100.00	%	100.00%	1
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41	OTHER HOLDING COMPANY	551112		Х	100	100.00	%	100.00%	4
42	OTHER HOLDING COMPANY	551112		Х	NONE	100.00	%	100.00%	44
43	Holding Company	551112		X	1,000	100.00	%	100.00%	40

JSA OC2010 1.000 For Paperwork Reduction Act Notice, see instructions.

Form **851** (Rev. 10-2016)

Totals (Must equal amounts shown on the consolidated tax return.)



